Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

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Division of Medicaid Emily Thompson 601-359-4122 CITY STATE 39201 SUBMIT DATE EMAIL EMAIL EMAIL EMAIL SUBMIT DATE Anne or number of rule(s): Emily thompson@medicaid.ms.gov SubMIT DATE App 2010-19 Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal; Specific legal authority authorizing the promulgation of rule. Miss Code Ann. \$43-13-121 (1972) as amended List all rules repealed, amended, or suspended by the proposed rule. Provider Policy Manual/Outpatient Hospital Section/Sections 26.17 and 26.23 ORAL PROCEEDING: An oral proceeding is scheduled for this rule on Date: Time: Place: Presently, an oral proceeding is not scheduled on this rule Presently, an oral proceeding in a not scheduled on this rule on the agency contact present at the above address within twenty (20 days after the filing of the proposed rule) of the submitted by a political authorizion, an agency or ten (10) or more persons. The written request should be submitted to the agency contact present at the above address switch twenty (20 days after the filing of the submitted or actions of the submitted of the special adoption and found include the manual devices, and telephone number of the person at the above address switch twenty (20 days after the filing of the submitted of the special adoption and found include the name, address, and telephone number of the person attorney, the name, address, and telephone number of the person attender, the name, address, and telephone number of the person and the submitted to the filing agency. ECONOMIC IMPACT STATEMENT: Economic impact statement not required for this rule. Original filing Renewal of effect in days Adoption by reference Proposed final effect in days Adoption by reference Proposed final effect the date: Other (specify): Other (spec	AGENCY NAME	CONTACT PERSON		TELEPHONE NU	IMBER		
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Effective date: Immediately upon filing	Original filing		Date	Proposed Rule I			
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Other (specify): Proposed final effective date: 30 days after filing Stamp Other (specify): December 1, 2010 30 days after filing Other (specify): December 1, 2010 Other (specify): Printed name and Title of person authorized to file rules: Bellett Robinson, Executive Director Signature of person authorized to file rules: DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP SECRETARY OF STATE SECRETARY OF STATE	Original filing Renewal of effectiveness To be in effect in days	Action proposed: New rule(s) Amendment to existing rule(s)	Date	Proposed Rule I n taken: Adopted with Adopted with	no changes in text changes		
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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.